

COLLINS (G.L.)

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OF
MEDICAL PRACTICE.

An Address Delivered at the Annual Meeting

OF THE

Rhode Island Medical Society, June 9, 1889.

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Mr. President and Fellows of the Rhode Island Medical Society:

Having been honored by the courteous command of our respected retiring President, to deliver before you to-day the so-called Annual Address, I have chosen for my subject the "State Control of Medical Practice." I trust you will pardon my choosing so ambitious a subject, to which the attention of so many able minds has been directed in recent years, but the moment seems propitious to bring the subject to your united attention; and though I have written with a halting pen, yet it is to the subject itself, rather than to well rounded periods, that I ask your indulgence.

The questions of the Legislative Control of the Practice of Medicine and the Relation of the State to the Medical Profession, have, in the last few years, been occupying, more and more, the attention of medical men and societies in this country, and have been forced, with increasing persistence, upon the attention of legislators and the public.

In the United States the position assumed by the State toward medical practitioners has long been an anomalous one. Medical men are held to account in the most rigid manner. They are obliged to give their time and knowledge without adequate compensation, grave responsibilities are thrust upon them; and yet there are still states of the Union which refuse to assist in elevating the standing of the profession, by passing adequate laws which shall be a guarantee of the standing of the medical man, and a safeguard to the public and the State itself.



To no other profession has the access been made so easy and unrestrained. By the laws, at present here in force, any one can assume the title of doctor and tamper with human life. History has illustrated the fact that, wherever quackery was allowed to flourish without legal restraint, it not only lowered the dignity and honor of the profession in the estimation of the people, but, in the unequal contest, many worthy members were dragged into corrupt and disreputable practices.

In an article, written in 1884, and published in the *Nineteenth Century*, suggested by a recent medical bill in Great Britain, Professor Huxley says, that in his judgment, the intervention of the State in medical affairs is not upon any pretence of protecting the public, "but simply and solely upon the ground that the State employs medical men for certain purposes, and as the employer has the right to define the conditions on which it will accept service"—that "it is for the interest of the community that no person shall die without there being some official recognition of the cause of his death;" that "it is a matter of importance to the community, that in civil and criminal cases, the law shall be able to have recourse to persons whose evidence may be taken as that of experts," and that "it will not be doubted that the State has a right to dictate the conditions under which it will appoint persons to the vast number of naval, military and civil medical offices held directly or indirectly under the Government."

Here, and here only, it appears to him, lies the justification for the interference of the State in medical affairs.

In his opinion the State should say to the public, "Practice medicine if you like; go to be practiced upon by anybody."

If that be the position taken by one of the leading scientific men of the age, and a medical man at that, can we wonder that our legislators, amid all the turmoil of political strife, have only recently been able to take the time to give the matter sufficient thought to arrive at a different conclusion. The agitation in this state is of comparatively recent origin. The interest of the public, and even that of many members of our own medical society, has not been fully aroused, and though the members of our legislature have had the subject before them, in the shape of bills to be amended and defeated, yet upon the minds of few has the

matter made such impression as the importance of the subject demands.

The idea prevails to a great extent, that the passage of a medical bill is urged as a protection to the physician—in other words, protection for a trades union—instead of which, it is the appeal of the members of a scientific body for the protection of the public against the imposition and deceit, ill treatment and malpractice, which, in the end, forces the attention of the intelligent physician to the results of the practice of medicine by uneducated persons and ignorant graduates.

There has also been a lack of harmonious action on the part of the members themselves of the medical profession. Too often, personal and selfish motives have usurped the place of the noble desire to advance the interest of the community and of the profession at large.

The members of the medical profession are the guardians and conservators of the public health. Whichever way their efforts may be directed—whether in endeavoring to save life or alleviate suffering, in the individual or the family—to stay the spread of epidemic disease; or going deep down to the root and devoting their efforts to the prevention of disease—they are constantly and honestly striving for the public good and endeavoring to promote the physical and moral welfare of the people as a whole. These well directed efforts, in which they have the hearty coöperation of town and State, have met with a certain success; and to the good results thus obtained, it is their natural desire and ambition to go a step further, and to the endeavor to prevent illness and the spread of disease, protect the public from the greatest scourge of modern times, the ignorant and unqualified or dishonest practitioner, who, actuated only by the lowest motives, and the desire of gain, flaunts before a too credulous people his tales of pretended cures, and prevails upon them to purchase, at exorbitant figures, the worthless nostrums which, though at times harmless, often sow the seeds of future suffering with which, at a later time, the skill of an educated adviser may be unable to cope.

Is it any wonder that we ask for relief by legislative enactment, from this multitude, both male and female, who, in the daily papers, advertise their cure-alls for every ill which flesh is heir to? or those who, without the use of drugs, claim to cure disease by the laying-on of hands—or the self-

styled faith curers—or even those who are presumptuous enough to claim that Almighty God has endowed them with miraculous power like the disciples of old, and who assert that in the future, when their science has reached its fullest development, they will be able to tell the sick man to take up his bed and walk! or, again, those who demand recognition for inherited gifts in the treatment of fractures and dislocations, or on the plea of being the seventh son of a seventh son, claim a skill in diagnosis and treatment rivaling any to be derived from long study and practice.

“ There’s no fool, whate’er the sex or grade,
Monk, barber, shrew, comedian or old maid,
Soap-boiler he, or pompous pharmacist,
Bath-keeper, forger or vile abortionist,
But has his name among wise doctors placed;
And thus, thro’ greed, the healing art’s disgraced.”

As I have said, is it a wonder that we ask for and claim relief; not a relief, however, for ourselves as medical practitioners—not a protection for an association, for a union of men banded together for their own interest and emolument—but in a wider, broader sense, for the people as a whole—for that public for whose good our city health departments and state boards of health are founded and maintained.

The aim, the greater aim and object of the study and practice of medicine, beyond that of the mere cure of disease, is its prevention, and the real and greatest progress in our Art during the century, is shown by the increased attention paid to public hygiene. This name itself, derived from that of the Goddess of Health, includes not only the removal of unwholesome conditions of cities and towns, but everything which may properly pertain to the physical welfare of the individual. To this end, the State, responsible through its officers elected by and of the people, is called upon to take such steps as the public weal requires to protect its members. As the visible guardians of the public health are its physicians, so the government of the State as the central power, made up of individuals whom the majority of its citizens consider best qualified to make its laws and appoint the proper functionaries to administer them, so should the State, I claim, decide as to the fitness of these guardians, and by its laws prescribe the methods by which they shall be appointed, and the qualifications necessary to the practice of the healing art among its people.

The policy of regulating by public ordinances, institutions necessary to the well being of the community need not be insisted on. It is sustained by the unwavering practice of all ages. The only question, then, to be considered on every occasion, is, how this function may be best exercised so as to promote the public good and the just interests of the institution to be regulated.

Any movement, in a democratic country like our own, having for its object the state regulation of the practice of medicine, is generally met and opposed by a cry of interference with individual rights, class legislation, and other well known formulæ. When, however, such a movement is supported by qualified medical practitioners, who best know the evils which prevail in the absence of restrictions upon medical practice, a suspicion immediately presents itself to the minds of a certain portion of their fellow-citizens, a suspicion which is sedulously cultivated by empirics and pretenders, that a monopoly is being created and that such men, however respectable in their daily walk of life, are seeking their own advantage, rather than that of the public.

In our own state, efforts to procure suitable medical legislation have not, so far, been crowned with success.

It is a fashion among us to speak of ourselves as a conservative people, but how few of us stop to think that conservatism in this sense, may be synonymous with lack of progress.

In that great celebration which has just taken place in New York, the most wonderful effort of its kind which has ever been successfully attempted on the face of the civilized globe, to how many of those who went from this state and either took part in it, or were lookers-on, did it occur that in the first union of thirteen states, the origin and beginning of this great nation, to how many was the fact recalled, that the state of Rhode Island was the last to join that union, and through her dilatory action was a cause of grief to all just patriots, and a grievous disappointment to that great heart who was the moving force of that union.

Since that time it has ever been the same, never a leader in progressive movements, always ungracious in accepting necessary reforms.

Let us take the lesson to heart, and let this Society and its Fellows, lend the force of their united voice to all needed reforms coming properly within its jurisdiction.

If this Society should exert itself as the importance of the question demands, and constantly keep this matter of the legislative control of medical practice before the people and the State, and if every individual Fellow should do his simple duty, the result would be, in the not far distant future, that the status of the medical practitioner in this community would be legalized by legislative enactment, and the mass of the people protected against charlatanry.

In these plantations Roger Williams, first in this country, advocated the theory that each man should be privileged to worship God in the manner prescribed by the dictates of his own conscience. This theory, however commendable in itself, is made the rule of action by many people in matters other than religion, and the idea appears unjust to them that they should not equally have the privilege of killing or being killed according to their own individual preferences. Interference with the liberty of the individual is the great bugbear of the opposers of all medical legislation. They point with pride to the opening clause of the constitution, that "all men are born free and equal," a premise which is readily granted, but, after birth the equality ceases, and the man is made or marred by the influences which surround him. But before the law all men are equal. We, as physicians, practicing under the Ægis of our Alma Mater, and under the rules and regulations of our medical society, ask only that in the eye of the law, other practitioners of medicine, whether with or without medical diplomas, shall be required by legislative enactment to submit themselves to the same qualifications to which we should all be ready to submit, and to which we should require that all future Fellows of our society should be equally ready to submit themselves.

In the admirable statistical report on medical education recently issued by the Illinois State Board of Health and prepared by Dr. John H. Rauch, who, by his individual efforts has accomplished so much toward raising the standard of medical education in this country, a careful resumé is given of the medical laws at present in force in the different states. Although the practice of medicine is, to a certain extent, regulated by law in a majority of the states and territories, yet these laws are so diverse in their provisions, and in some of the states so loosely enforced, that it is in only a limited number that laws are at present in force which can be characterized as adequate and efficient, and which answer the purpose for which they were originally intended.

The standard of the various laws, the best and most suitable at present in force, is, as I hope to demonstrate to you later, the medical practice act of the State of Illinois.

In studying or discussing the subject of medical legislation it is necessary to refer often to the law of Illinois, and to the most enlightened efforts of the Board of Health of that state to raise the standard of medical education, both in their own state and in the country at large. Taking, as I said, the law of Illinois as a standard, the only states possessing really good medical laws, the best in fact in the country, are, among the southern states, Alabama, Louisiana, Maryland, Mississippi, North Carolina and West Virginia. Among the western states and territories are Illinois, Iowa, Kentucky, Minnesota, Missouri, New Mexico and Wyoming, and in the middle states, New York. These states and territories are the farthest in advance and have to the fullest extent succeeded in protecting their people and promoting their welfare by the passage of adequate laws to restrain empiricism and to raise the standing of the regular practitioner. In Pennsylvania and Massachusetts bills have been recently before their respective legislatures and have undergone the usual difficulties through which any philanthropic measure has to pass before its advisability and necessity become apparent to the legislators.

In our own state the initial step toward bringing a medical bill before the legislature was taken at a quarterly meeting of this Society, held March 19, 1879. It appears by the records of the Society that at this meeting a resolution was offered by Dr. W. E. Anthony, to the end that a "committee be appointed to consider the feasibility of petitioning the legislature for a law regulating the practice of medicine in this state."

The result of this resolution was the appointment of a committee. Nine months after this time, at the quarterly meeting in December of the same year, this committee reported that "they had given the subject a full and careful consideration; that they had taken into account the different views that might be entertained in relation to the question, and such views as they had heard expressed at the meeting at which the question was proposed; that they had also obtained all the information within their reach, in regard to the salutary result of such a law as is contemplated, in other states; and from this full consideration they had

concurred in recommending that a committee be appointed by the President to petition the legislature to enact a law regulating the practice of medicine and surgery in the State of Rhode Island."

The report of this committee was accepted and it was voted "that the President appoint a committee of three to draft a law regulating the practice of medicine and surgery in this state, and to submit the same to the Society at the next meeting." At the annual meeting in 1880, the chairman of that committee reported "that there was little prospect of success in procuring legislation for the purpose; but, nevertheless, the committee reported to the Society the draft of a bill."

The report was received and the committee continued. The draft of the proposed bill does not, I regret to say, appear on the Society's records, and there is no further mention of a report from this committee.

At the annual meeting in 1885, in response to a communication received from the American Medical Association in relation to establishing a State Board of Medical Licensers, a committee of three was appointed by the President to consider and report on the matter. At the quarterly meeting held in December the committee appointed to consider this communication from the American Medical Association, in reference to state registration of practitioners of medicine, reported as follows: "That although we believe that an act to regulate the practice of medicine would prove of very great value to the citizens of this State, and presented in proper form, would be readily adopted by their representatives in legislature, we do not believe that the act referred to us is well adapted for the purpose. Not only is this proposed act lengthy and cumbersome, but it would establish a new branch of the state government, and on this account alone would be sure to meet with strong opposition. It would, in our opinion, be a much better plan, as well as more feasible, to place the licensing power in the hands of the Board of Health, making such changes in the constitution of this board as might be necessary."

The report of this committee having been accepted and the committee discharged—as is shown by our records—there was no further official action taken on this important matter.

Far be it from me to criticize the action of this Society in

the premises. I beg to be allowed, however, to express the hope, that at no distant date, such action may be taken as speedily to put the standing of physicians in this state on a firmer basis, and the profession as a whole elevated.

Undoubtedly at the time this question was first presented to the Society, its Fellows had formed no opinion upon the subject; and when a second time it came officially before them, the committee appointed for the purpose reporting that in their judgment legislation was desirable, the Fellows of the Society, presumably, did not consider that the suitable time had arrived for efficient action to be taken.

In 1883 this Society actively interested itself in procuring what was called the Medical Examiners' Bill. Immediately after the subject was brought before the Society for action, a committee was appointed to draft a suitable bill; the matter was brought before the legislature, the bill slightly modified in its passage, and the present law went into force in July, 1884. There was no question as to the utility of such a measure; the Society interested itself actively, with a most satisfactory and encouraging result. What we need now is the same active interest, which each Fellow of the Society should do his best to promote.

At the winter session of the legislature of Rhode Island in 1887, the first bill, tending toward the legislative control of the practice of medicine, was introduced. It embodied the salient features of the law shortly before that time put in force in Illinois, and which has served as a model in medical legislation since that time. The principal features of the latter law I will bring to your attention later. The bill introduced in our legislature, as above mentioned, received, certainly, careful attention at the hands of the committee having it in charge. Five hearings were held, at which full opportunity was given for those interested to appear. Arguments in favor of the proposed legislation were presented by Fellows of our Society, both by those connected in their official capacities with the city and state health departments, and by other prominent members. Members of the Homeopathic Society appeared equally, to offer arguments in favor of the proposed act. Equal opportunity was also given to the opponents of the bill, at which appeared a number of irregular practitioners, who presented the time-worn arguments; and opportunity was also given laymen to recite the numberless instances in which their relatives and friends had

been relieved from incurable disease by some person who, under the proposed act, would be classed as incompetent, and forbidden by law to practice.

The outcome of all this was the preparation of a substitute bill which introduced certain amendments, one of which, although in no way tending towards the accomplishment of the desired result of raising the standard of the profession of the state, was an absurd and harmful measure, and rendered the proposed bill absolutely undesirable. It was to the effect "that every sick or injured person taken to any hospital or charitable institution, should have the privilege of having his own physician, whether a member of the staff of such institution or not; and that the latter should be courteously treated and have the privilege of visiting his patient at any time he might see fit, or the welfare of the patient demanded it." A better example of meddlesome legislation could not be afforded than this. The introduction of such a clause was not only uncalled for, but injured the bill itself in the opinion of every intelligent physician who, knowing the discipline to be maintained in all institutions intended for the care of the sick, would not ask for such a privilege at the hands of the law if it were not freely accorded by the administrators of such institutions.

The further course of this first attempt to place the control of medical practice under the law of the state, possesses no further interest for us, as the bill was defeated when acted on in the usual manner.

On the 29th of January of the present year, a bill was again introduced, providing for the registration of physicians and regulating the practice of physic in this state. This provided for the appointment of a board of seven graduates in medicine, to serve for six years, who were to examine diplomas and issue licenses, and further, prescribed penalties upon those practitioners who might not be registered.

At a subsequent hearing before the committee, there was a large attendance of physicians and others from different parts of the state, and the subject under consideration was fully discussed. A substitute bill was later introduced by the committee to which the original bill had been referred. This embodied no changes of sufficient importance to impair the usefulness of the proposed law. This act, however, failed of passage; but later, the vote having been reconsidered, substantially the same bill was again put upon its che-

quered course. This, however, was rapidly run, and though meeting with the approval of the House of Representatives was, in the Senate, indefinitely postponed.

The history of these efforts to establish state control of medical practice in Rhode Island, shows that the importance of the matter is now coming to be recognized by our legislators.

Further action has been postponed to the coming winter, and it behooves every Fellow of this Society to give earnest thought to the subject, and as far as may be in his power, to encourage by word and deed all legitimate efforts, not only to procure a law, but a suitable law, which shall put all physicians on the same plane of equality and do away with the irregular methods which have so long prevailed in our midst.

To properly consider the subject each Fellow should have in his mind a definite idea what a medical law should be, what points should be properly covered by it, whom it should control, and what class of practitioners should, by its provisions, be forever prevented from treating the sick, unless they are willing and able to properly qualify themselves under the provisions of the law.

No bill can be drawn, no law will be passed, which in the nature of things can be entirely satisfactory. There must be mutual concessions and more latitude allowed than probably some of us might think best or necessary. A law, just and liberal in its provisions, is what we are justified in asking; and that will justify us later in demanding that it be executed according to its strict letter.

In the state of Illinois the regulation of the practice of medicine by legislative enactment has reached what we might term its highest stage of development. The present law, in force since July 1, 1887, is very definite in its propositions and stringent in its provisions. While not a perfect law, yet it is far reaching in its benefits and under its present interpretation will go further toward raising the standard of the profession in this country than any previous effort which has been made.

The provisions of the act are briefly as follows:

On application to the State Board of Health, a graduate in medicine, from a legally chartered institution in good standing, shall receive a certificate to practice medicine in the state.

If not a graduate he shall submit to such examination as

the board may require, and if his examination be satisfactory, he shall be entitled to the same privileges as the licensed possessor of a degree.

The board has the privilege of defining the term "medical institutions in good standing." It is authorized to receive fees for certificates, and is required to furnish county clerks with lists of persons to whom certificates have been granted.

By a vote of the State Board of Health the phrase "medical colleges in good standing" is defined to include only those colleges which, after 1891, shall require four years of professional study, including any time spent with a preceptor, and three regular courses of lectures, as conditions of graduation.

All holders of certificates shall record them at the office of the clerk of the county in which they reside, within three months of their date, and until this be done shall not be privileged to practice.

This law further provides that the examinations, which may be wholly or in part in writing, shall be of an elementary and practical character, but sufficiently strict to test the qualifications of the candidate as a practitioner.

The State Board of Health is given the right to refuse to issue its certificate to any individual guilty of unprofessional or dishonorable conduct, and to revoke each certificate for like causes. In cases of refusal or revocation, the applicant may appeal to the governor, and his decision is final.

The law defines a practitioner of medicine, within the meaning of this act, as one who shall treat, operate or prescribe for any physical ailment of another; but provides that nothing in the act shall be construed to prohibit aid in cases of emergency, or the domestic administration of family remedies, or to apply to any officer of the army or navy or marine hospital service in the discharge of his official duties.

Any person practising medicine contrary to the provisions of this act is subject to a penalty for the first offense of \$100, and of \$200 for each subsequent offense. But the law specially exempts any person who had been occupied in the practice of medicine for ten years before its passage, provided he make application in due form for a certificate from the board.

A further clause provides that every itinerant vender of any drug, nostrum or ointment intended for the treatment of any disease or injury, or who shall, by writing or printing, or

any other method, profess to cure disease or deformity, shall, on proper application to the State Board of Health and the payment of \$100 per month, receive the license of the board, though it is permitted to them to refuse such license for sufficient cause.

These are the salient features of the law as at present in force. Its working is understood to be most satisfactory. It has withstood careful scrutiny before the courts, and is administered with strict impartiality. With the exception of one clause it appears to be a most admirable law, and worthy of imitation in states where there is no law extant, or where a less stringent law is in force. The one provision which seems to me unsuitable and undignified, is the clause which permits the venders of quack medicines to advertise and prescribe their nostrums under the license of the Board of Health, on the payment of a stipulated monthly sum. As this is one of those evils of which conscientious physicians are most anxious to rid the people, so it would appear that in framing a law for use in this state, this provision should be passed by, and it made impossible for such persons to ply their calling in our midst, and only notice them by providing a penalty in case they endeavor to impose their wares upon the public.

The most recent efforts to procure necessary and additional legislation regulating medical practice have been in Pennsylvania and Massachusetts. The bill in Pennsylvania has been so persistently altered and amended as materially to impair its usefulness.

It is a self-evident fact that all practitioners of medicine are, and must remain, equal before the law, and consequently any legislative act can, in no case, discriminate against or in favor of any regular physician, or one representing any so-called school of medicine. The composition of a State Board of Examiners, must, in the nature of things, be such as will prove satisfactory to all medical men concerned, and such as will insure fair and impartial treatment of all candidates appearing before it. In order to accomplish this result, an obviously suitable method would be to elect, as members of an examining board, Fellows from each of the three medical societies usually recognized, in proportion to their membership. The present act as amended by the Pennsylvania legislature, provides that representatives of the regular profession shall never constitute a majority of the examining boards.

This provision is certainly unjust, and, considering the overwhelming majority of regular physicians in that State, an unfair discrimination and an injurious use of legislative power calculated to work as much harm as good. A further amendment requires all the medical schools of the State to adopt a four years' course. This, though in the interest of a higher medical education, is premature, and at the same time saddles the bill with a feature not properly belonging to such an act, and which might with greater propriety be left to the discretion of the examining board, as we have seen to be especially provided by the Illinois law. In our neighboring state of Massachusetts a bill has been recently presented to the General Court, which, however, has followed the fate of its predecessors and has met with a speedy death.

With the exception of one clause this bill did not differ materially from the one we have been considering. The provisions of this clause merit, however, notwithstanding the fate of the bill, to be laid before you. It provided that all persons in future desiring to practice medicine in the state of Massachusetts should file an application with the Board of Health, stating their name, place of residence, and by which of the three following medical societies they desired to be examined: the Massachusetts Medical Society, the Massachusetts Homeopathic Medical Society, or the Massachusetts Eclectic Medical Society. The secretary of the board should then notify the medical society indicated and the applicant should present himself for examination before said society, which, after examination, should notify the secretary of the Board of Health whether the candidate had satisfactorily passed his examination. If the report were favorable, then the Board of Health should duly issue to him a license to practice in the state.

This act exempted from the bearing of the law physicians from another state in actual consultation with a licensed physician. It also provided a penalty of not exceeding five hundred dollars or imprisonment in jail not exceeding six months, for any person practising otherwise than in conformity with it. A practitioner was defined as any person who should publicly profess to be a physician or to prescribe for the sick or injured, or who should append to his or her name the letters M. D., or who should treat or attend as a physician any person for money, gift or reward.

We have now before us the important points of two laws,

one in actual operation for a period of two years, the other, which had presumably been compiled after careful examination and study of all the laws at present in force in this country, and as representing the opinion of the physicians of Massachusetts, as best fitting the local surroundings. The characteristic feature of the Massachusetts bill, the provision that each candidate should be examined by his own medical society, is cumbersome, and does not, in my opinion, accomplish what is so desirable: that is, a common examination for all applicants for a license, and that examination held under the direct auspices of a board, either chosen for the purpose, or to which that function has been delegated.

At present all medical societies in good standing require examinations for admission for all persons desiring to become members. There probably, under these circumstances, would not be held double examinations; and a certain result hoped from the proposed law would not be so apparent in the community. A standard of absolute equality for all physicians, whether practising according to our own standard, or that of a select school, would tend more to elevate the profession, individually and collectively, in the estimation of the public.

It is not, in all states, feasible to provide for a special board to examine candidates for a state license, but it is a function which can be delegated to the existent Board of Health; or, as in the state of Illinois, the State Board of Health could be re-organized according to the exigencies of the situation.

In my opinion, a law suited to this state would best combine some of the features of these laws which I have presented to you to-day, perhaps more fully than the time and occasion allow. The provisions of the Illinois act, with the omission of one clause and the addition of several minor points from the Massachusetts bill, would in this state be a fitting enactment, and the means of doing incalculable good.

As stated in the report of the committee, presented to this society in 1885, it would be inadmissible to urge upon the legislature the creation of a new branch of the state government; and, for that reason if for no other, the powers of an examining and registration board would be properly vested in the State Board of Health, a body of gentlemen who, in this state, would no doubt at a future time

most cheerfully assume such additional duties, and administer them with the same public spirit which characterizes their present labors.

In the state of Rhode Island, according to the last issue of the Directory, there were classed under the head of physicians, that is, those who describe themselves as practitioners of medicine, 430 individuals. Of these, 239 were in the city of Providence, 191 in other parts of the state. Of the whole number 223 were described as members of medical societies. Besides the latter number, there are several physicians, graduates of colleges in good standing, who have not affiliated with any association. During the last year, of course this number has increased, and to-day this society has received a large and welcome addition to its membership. Besides those practitioners whose names appear in the official lists there are numerous irregular practitioners, either transient guests in the state, self-styled professors in so-called medical institutes, or the veriest charlatans of low degree, all of whom go to swell the number of ignorant, impudent and unqualified practitioners; so that the figures would not be too large if we estimate that we have in this state, outside of regular graduates in medicine, 200 persons practising as physicians, the greater portion of whom would be ineligible to practice medicine under a just and liberal law.

As I have previously stated, a bill will probably be presented at the coming session of our legislature to regulate the practice of medicine and surgery in this state. It has been suggested that a suitable law for Rhode Island might be framed on the basis of the law at present in force in the neighboring state of Connecticut. The law in force in that state, and which is more honored in the breach than in the observance, is simply an act providing that all itinerants who profess to treat disease must obtain a license from selectmen in towns, or chiefs of police in cities, a measure which would be a backward step rather than a movement in advance.

Now is the opportunity for timely action by this society. The period of time which will elapse is amply sufficient for us to give that proper attention to the subject which its importance warrants, and I appeal to you, Fellows of the Rhode Island Medical Society, to take the matter in hand to-day, to take timely action now, so that when a law shall be passed and put in force, we cannot reproach ourselves

that, through neglect on our part, its provisions are not far reaching and a direct step in that upward progress of our profession which is the just aim and desire of us all.

It is not the time or the season to object to medical legislation. It has become a necessity, and can, in no sense, be considered to be an interference with the rights of the individual or an encroachment on personal liberty.

The objection is made that such legislation is made for the benefit of a privileged class. I claim that it is not so, that it is a direct step forward, in advance, and the conferring of a distinct boon on that suffering poor whom we have always with us. In the words of an honored ex-president of our Society, at a hearing before the committee which had in charge the medical bill of two years ago, when the physicians present were reproached with seeking class legislation: "the legislation asked for is, in one sense, class legislation. It is class legislation for the classes of the poor, the sick and the suffering, whose lives are jeopardized, every day and hour, by dishonest and incapable practitioners, a class which *ought* to be legislated against, and the poor and sick protected."

As every man and woman has the right to practice medicine, is it not just that there should be some common standard, beside their own vain pretensions, by which it should be made known to the public, that they are, at least in the eye of the law, competent to treat the ills of mind and body to which mankind is liable?

In the course of a decision, rendered in the United States Circuit Court in Illinois, the Court says: "All the learned professions are on a par with each other, and many other occupations on a par with them. In a certain sense it is true that every man has a natural right to follow out the bent of his inclination and be a clergyman, a lawyer, a doctor, a scavenger, a peddler, or an auctioneer, just as he may choose. But it is not true that a man can practice any one of these professions or occupations, except he does it on such terms as the law imposes, and the law can impose just such terms on employments, as the legislators, in their discretion, deem best for the interest of the community. The law has always sought to fill the learned professions with learned men, and upright and honorable men. However sadly it may have failed, the attempt has been in the right direction. It, therefore, has hedged around the professions of law and

medicine, as it has hedged in many other businesses in the same way. Men who have the property and life of others especially entrusted to their keeping ought to be men of skill and honor in their several departments.

"More than that: it is of the utmost importance that all dishonor and dishonesty should be expelled from the learned professions; and the tendency of legislation has always been to effect this result. If, then, a man has the natural right to be a lawyer or a doctor, he possesses that right subject to every restriction which the law may have created before, or which it shall create subsequent to, his entrance upon the given profession, and which restrictions shall tend to secure for it upright and honorable practitioners and to elevate that profession and make it more beneficent in its influences upon, and relations to, society."

